

**STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
BOARD OF REGISTERED NURSING MINUTES**

DATE: April 6-7, 2006

TIME: 9:00 am Both Days

LOCATION: Hilton Torrance/SouthBay
21333 Hawthorne Blvd.
Torrance, CA 90503-5645

PRESENT: LaFrancine Tate, Public Member, President
Grace Corse, RN, Vice President
Jill Furillo, RN, Vice President
Carmen Morales-Board, MSN, RN, NP
Elizabeth O. Dietz, Ed.D. RN,CS-NP
Mary C.Hayashi, Public Member
Orlando H. Pile, M.D.
Susanne Phillips, MSN, RN, APRN-BC, FNP

NOT PRESENT: Janice Glaab, Public Member
Jill Furillo – April 6, 2006
Mary C. Hayashi – April 7, 2006
Orlando H. Pile, M.D. – April 7, 2006

ALSO PRESENT: Ruth Ann Terry, MPH, RN, Executive Officer
Heidi Goodman, Assistant Executive Officer
Elliot Hochberg, Manager, Enforcement Program
Carol Stanford, Manager, Diversion/Probation Program
Louisa Gomez, Manager, Licensing Standards & Evaluation; Advanced Practice
Louise Bailey, MEd, RN, Supervising NEC
Maria Bedroni, EdD, MN, RN, NP, Supervising NEC
Miyo Minato, NEC, RN
Grace Arndt, MSN, RN, NEC
Badrieh Caraway, RN, MS, Med, NEC
Carol Mackay, RN, NEC
Antonette Sorrick, Deputy Director, Board Relations
Eric Sawyer, Administrative Law Judge
Gloria Barrios, Deputy Attorney General
LaVonne Powell, Legal Counsel
Bill Holland, Deputy Director of Division of Investigation
Christina Sprigg, Enforcement Program
Eleanor Calhoun, Recording Secretary

Thursday, April 6, 2006

1.0 CALL TO ORDER

L. Tate, Board President, called the meeting to order at 9:10 am and had the Board members introduce themselves. The Board welcomed students from Golden West College.

2.0 DISCIPLINARY MATTERS

The Board convened in closed session pursuant to Government Code Section 11126(c)(3) to deliberate on these matters and other disciplinary matters including stipulations and proposed decisions, and pursuant to Government Code Section 11126(e)(1,2(A)) to confer with Legal Counsel regarding pending litigation.

Termination of Probation

BAIN, Barbara	GRANTED
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Reinstatements

ARELLANO, Teresa Marie	GRANTED, 3 years probation
BLESSING, Loran Renee	GRANTED, 3 years probation
HIX, Lois Susan	GRANTED, 3 years probation
MUSIAL, Thomas	GRANTED, 3 years probation
PAIVA, Micelle Marie	GRANTED, 5 years probation

Closed Session Discussion Items

L. Tate, Board President, called the closed session meeting to order at 12:20 pm. The closed session adjourned at 2:30 pm.

Friday, April 7, 2006

L. Tate, Board President, called the meeting to order at 9:03 am and had the Board members introduce themselves.

3.0 OPEN FORUM

Bill Holland, Deputy Director of the Division of Investigation, made a presentation to the Board's Enforcement Program Manager, Elliot Hochberg and staff, for the outstanding training provided to Division of Investigation investigators on November 7-9, 2005 and January 31, 2006 thru February 2, 2006.

4.0 APPROVE/NOT APPROVE MINUTES OF February 16-17, 2006 Board Meeting.

MSC: Dietz/Phillips that the Board approve minutes from the February 16-17, 2006 Board meeting. 6/0/0

5.0 REPORT ON BOARD MEMBERS' ACTIVITIES

No activities reported.

6.0 EXECUTIVE OFFICERS' REPORT ON BOARD AND DEPARTMENT ACTIVITIES

R. Terry presented this report

1.0 Board's Budget Update

Budget Hearings - On March 22, 2006, the Senate Budget Subcommittee No. 4 was held. The subcommittee approved the Board's budget at \$21.3 million for FY 2006/07. The Assembly Budget Subcommittee No. 4 hearing was cancelled and a new hearing date has not been set at this time.

General Fund Loan - A General Fund loan re-payment of \$5.8 million was posted to the Boards January receipts. This brings our reserve to 5.9 months for FY 2005/06. As expenditures continue to outweigh receipts, the Boards reserve will again drop to 3.4 months for budget year 2006/07. The outstanding loan balance is \$6.2 million, and the Board has not been provided with a re-payment date.

2.0 Sunset Review

As previously reported the Board's Sunset Review was due September 2006; however, the Board has learned that the Sunset due date has been moved forward and will be due in 2008.

3.0 NURSIS® User Group Meeting

On March 7-8, 2006, Louisa Gomez, Licensing Program Manager, attended the first Nursis® User Group Meeting in Chicago, IL. Nursis® is the national database developed by the National Council State Boards of Nursing (NCSBN) and the Board supplies NCSBN with all disciplinary actions that have been taken against a registered nurse. This information is then uploaded to the HIPDB. Additionally, the Board's Licensing Unit uses Nursis® to obtain licensure information from participating states on RNs endorsing their license to our state. The meeting covered the day-to-day issues related to Nursis®; the outcomes from the Nursis® satisfaction survey; and ideas to improve Nursis®. Forty state boards of nursing participated in this meeting.

4.0 Division of Investigation (DOI) Investigator Training

At a recent DCA Executive Officers Meeting, Kathy Door, Chief, Division of Investigation acknowledged the outstanding training that was provided to the Divisions' Investigators by Elliot Hochberg, Enforcement Program Manager, Lisa Kawano, Diversion Program Manager, and Hanna Hirsh Rose Deputy Attorney General, BRN Enforcement Program Liaison. Ms. Door also acknowledged the work and efforts of Louise Bailey SNEC, Janette Wackerly, NEC, Carol Stanford, AGPA, Diversion Program, Dawn Kammerer and Cindo Flores, AGPA Enforcement Program.

To recap this training, the BRN provided 2 - two and half day training sessions, one in Southern California on November 7 – 9, 2005, and one in Northern California on January 31 – February 2, 2006. The training course provided a comprehensive review of

complaints against registered nurses, advanced practice nurses, and nurse imposters. The training provided an extensive review of the most important types of Nursing Practice Act violations, agency record availability, and the Standard of Evidence used in administrative hearings with an overall emphasis on current laws and regulations. Additionally, investigative techniques and protocols, evidence gathering, undercover operations and report writing were also emphasized. Feedback from attendees was very positive and the consensus was that this training would improve the quality of investigations that are performed by DOI.

5.0 DCA Updates

Nanette Madsen, of Fair Oaks, has been appointed deputy director for external affairs at the Department of Consumer Affairs. She has served as special assistant to the chief of staff in the Office of the Governor since 2005. Madsen was previously senior legislative aide in the Office of the Governor and legislative assistant for Senator Jeff Denham.

Antonette Sorrick, of Sacramento, has been appointed deputy director of board relations for the Department of Consumer Affairs. She has served as assistant deputy director of the Consumer and Community Relations Division for the Department of Consumer Affairs since 2004. Prior to that, Sorrick served as policy and research manager at the California Building Industry Association from 2003 to 2004 and was deputy assembly political director of the Californian Republican Party from 2001 to 2003.

6.0 State and Consumer Services Agency Update

George Valverde, long time undersecretary for the agency has been appointed director of the Department of Motor Vehicles. William Bush, Elk Grove, has been appointed as the new undersecretary. He formerly worked for Franchise Tax Board.

Christine Rubin, San Diego, has been appointed deputy secretary for communications at the agency. She currently serves as communications director for Chuck Poochigian.

7.0 NCSBN Mid Year Meeting

The Annual Midyear meeting of NCSBN was held in Chicago, March 13-15, 2006. The theme this year was “The Threshold of Regulatory Excellence – Taking Up The Challenge.”

The first day was the leadership forum for Executive Officers and Presidents. The leadership forum for Executive Officers was the first joint meeting held with Executive Officers from state medical boards and boards of nursing. The focus of this seminar was identifying how to ensure safe practitioners through collaboration and regulatory excellence. Twenty-nine (29) medical boards and staff of the Federation of State Medical Boards were in attendance. The California Medical Board was unable to attend. The leadership seminar for board presidents focused on communication and collaboration. The consultant to the group provided techniques on how to deal with the media.

The next two days were webcast nationally, and the California nursing education consultants participated. President Donna Dorsey reviewed the progress, to date, on NCSBN Strategic Plan. There were two keynote speakers, Barbara Safriet, Associate Dean, Yale Law School presented her thoughts and reflections on the future of health care licensing. It's interesting to note that the California BRN held a first statewide conference in the mid 1990's on advanced nursing practice and Ms. Safriet along with Susanne Gordon were our keynote speakers!

The second speaker was Dr. Sean Clark, Associate Director, University of Pennsylvania School of Nursing, Center for Health Outcomes and Policy Research. He focused on "Nurse Workforce Issues and Patient Safety: Research Insights." He shared his joint research that was conducted with Dr. Linda Aiken. California is part of the follow-up research on patient safety and the impact of RN staffing.

The remainder of the meeting focused on proposals that will be presented at the Delegate Assembly in August. Highlights included a discussion on the role of the Delegate Assembly and the Board of Directors. Proposed bylaw changes were presented from the Governance & Leadership Advisory Panel, and the Bylaws Committee, that was felt to enhance the NCSBN organizational culture to support change and innovation.

The Advanced Practice Nurse Advisory Panel presented their vision paper on APRNS. The proposal included recommending licensure for APRN including a licensure exam, deleting the CNS category and combining the CNS into the Nurse Practitioner category. The Board has received a number of calls opposing their position.

Several states have requested NCSBN to explore the feasibility of an alternate language NCLEX examination primarily in Spanish for Puerto Rican and Cuban nurses. The initial exploratory areas would look at offering a Spanish exam, a drop down dictionary or a double screen in English and Spanish. The discussion centered on the legislative proposals in several states.

The Examination Committee presented the proposed changes to the NCLEX-RN test plan and implementation timelines. California raised the issue of the expansion of international testing sites and the potential impact on workload that may result from this major increase of sites.

The Continued Competence Task Force continues to work on a draft framework for a continued competence regulatory model.

The final presentation was on "Lessons Learned: Response to Hurricane Katrina and Hurricane Rita." The Executive Officers from Alabama, Louisiana-RN, Mississippi, and Texas discussed their experiences. Needless to say, there was not a dry eye in the room! It is very important that California continue to actively be involved in NCSBN. The policies and operational decisions made by NCSBN can result in significant impact to the BRN. Attendance at these meetings and continued participation on NCSBN committees and task forces not only provide an invaluable opportunity for input from the Board's perspective, but the networking that occurs strengthens the Board's relationship with other states.

8.0 **Personnel**

The following personnel changes have transpired since the last Board Meeting:

<u>New Hires</u>	<u>Classification</u>	<u>Board Program</u>
Edward Montoya	Office Assistant	Licensee Support
Sheila Granby	Staff Services Analyst	Licensing
Sonya Adams	Key Data Operator	Licensing
Esperanza Montiel	Key Data Operator	Licensing

<u>Promotions</u>	<u>Classification</u>	<u>Board Program</u>
DeAnn Corrado	Mgmt Services Technician	Licensing
Lorraine Clarke	Staff Services Analyst	Licensing
Carol Stanford	Staff Services Manager I	Diversion/Probation
Heidi Goodman	Asst Executive Officer II	Administration
Le'Shell Thompson	Office Technician	Licensee Support

<u>Separations</u>	<u>Classification</u>	<u>Board Program</u>
Rosa Garcia-Farman	Office Technician	Licensee Support
Sean McClary	Office Assistant	Licensee Support
Sonja Chavez	Key Data Operator	Licensee Support

7.0 **REPORT OF THE ADMINISTRATIVE COMMITTEE**

L. Tate, Chairperson

7.1 **Information Only: Update On Strategic Planning**

R. Terry presented this report

The Strategic Planning workshop will be held on June 7, 2006, in San Diego, California.

7.2 **Information Only: Board of Registered Nursing Committee Appointments**

L. Tate presented this report

ADMINISTRATIVE COMMITTEE

LaFrancine Tate, President

Grace Corse, RN, Vice President

Ruth Ann Terry, MPH, RN, Executive Officer

EDUCATION/LICENSING COMMITTEE

Elizabeth O. Dietz, Ed.D., RN, CS-NP, Chair

Susanne Phillips, MSN, RN, NP

Janice Glaab

Carmen Morales-Board, MSN, RN, NP

Staff Liaison

Miyo Minato, MN, RN, NEC

NURSING PRACTICE COMMITTEE

Susanne Phillips, MSN, RN, NP, Chair

Grace Corse, RN

Carmen Morales-Board, MSN, RN, NP

Elizabeth O. Dietz, Ed.D., RN, CS-NP

Staff Liaison

Janette Wackerly, MBA, RN, NEC

LEGISLATIVE COMMITTEE

LaFrancine Tate, Chair

Orlando H. Pile, MD

Mary C. Hayashi

Staff Liaison

Louise Bailey, MEd, RN, Supervising NEC

DIVERSION/DISCIPLINE COMMITTEE

Grace Corse, RN, Chair

Jill Furillo, RN

LaFrancine Tate

Staff Liaisons

Elliot Hochberg, Enforcement Program Manager

Carol Stanford, Diversion/Probation Program Manager

8.0 REPORT OF THE LEGISLATIVE COMMITTEE

L. Tate, Chairperson

8.1 Information Only: Adopt/Modify Positions on Bills of Interest to the Board

Louise Bailey presented this report

AB 1591 Chan: Medi-Cal: nurse practitioners

MSC: Furillo/Phillips that the Board support AB 1591. 6/0/0

AB 1972 Daucher: Community colleges: employment of faculty

MSC: Phillips/Dietz that the Board support AB 1972. 6/0/0

AB 2086 Dymally: Community colleges: nursing and teacher preparation programs

MSC: Furillo/Phillips that the Board support AB 2086. 6/0/0

AB 2120 Liu: Vehicles: disabled persons: disabled veterans: paring placards

MSC: Dietz/Phillips that the Board support AB 2120. 6/0/0

AB 2313 Arambula: Student financial aid: Ortiz-Pacheco-Poochigian-
Vasconcellos Cal Grant Program: nursing education
MSC: Phillips/Dietz that the Board support AB 2313. 6/0/0

AB 2564 Matthews: Criminal Record Clearances
MSC: Furillo/Dietz that the Board watch AB 2564. 6/0/0

SB 847 Ducheny: Community colleges: faculty
MSC: Phillips/Furillo that the Board watch SB 847. 6/0/0

SB 1309 Scott: Nursing education: State Nursing Assumption Program of
Loans for Education: California Community Colleges
MSC: Furillo/Phillips that the Board support SB 1309. 6/0/0

SB 1423 Figueroa: Laser procedures
MSC: Furillo/Phillips that the Board watch SB 1423. 6/0/0

SB 1759 Ashburn: Health facilities: background checks
MSC: Furillo/Phillips that the Board watch SB 1759. 6/0/0

9.0 REPORT OF THE DIVERSION/DISCIPLINE COMMITTEE

J. Furillo, Chairperson

9.1 Information Only: Enforcement Program Update and Statistics

E. Hochberg presented this report

A copy of the Enforcement Program statistics for the first seven months of fiscal year 2005-2006 (July 2005 through January 2006) was provided for review.

The number of licensee disciplinary actions and pleadings filed is still projected to be less than last fiscal year. However, the number of referrals to the Attorney General's Office (AG) by the Enforcement Program is projected to be greater than any of the five previous fiscal years, with a projected 38% increase over last fiscal year.

The number of complaints received is also projected to be greater than any of the five previous fiscal years, with a projected 10% increase over last fiscal year.

The Board will continue to monitor statistics and future projections, in light of the AG budget increase in fiscal year 2005-2006. Also, continue to monitor the Division of Investigation on aging cases and cases referred to DOI in fiscal year 2005-2006.

9.2 Information Only: Enforcement Program 2005 Goals and Objectives Summary of Accomplishments

E. Hochberg presented this report

Goal 1:

The Enforcement Program will promote consumer protection by effectively intervening to restrict the practice or revoke the licenses of registered nurses who have violated the Nursing Practice Act and related laws.

Objective 1.1: The Enforcement Program will develop cost effective, efficient, and innovative methods for managing discipline cases to achieve desired outcomes.

Continue to evaluate and monitor activity of the Attorney General's (AG's) Office, including case statistics, and future projections in light of current budget limitations, and augmentation in fiscal year 2005-2006. Monitor AG and DOI compliance with timeframes and streamlining procedures.

The 2005-2006 AG budget augmentation has been closely monitored during the latter part of 2005. The AG's Office has provided regular reports on the budget status, and quarterly updates on case aging status in their ProLaw database reports. These quarterly reports are checked against reports generated by the Enforcement Program. The DOI case labor activity is monitored and approved as part of case management, and closer contact with DOI has reemphasized the need for tighter timeframes.

Explore innovative procedural changes to provide timely completion of cases within the BRN.

The Enforcement Program Manager and Enforcement staff made changes to the instructional information provided to DOI, and provided the first part of a comprehensive training program to DOI. Such training should assist with accuracy and completeness of investigations and therefore assist with meeting more efficient timeframes.

The Enforcement Program Manager has continued to work with the AG liaison on procedural issues for the transmittal of licensee, advanced practice, and applicant cases, in order to expedite their disposition.

Evaluate case outcomes to identify strategies to enhance Enforcement Program effectiveness and efficiency.

Retrospective review of stipulated agreements, proposed decisions, and default decisions continue to be conducted by the Enforcement Program Manager to identify issues of aging, internal Enforcement Program procedural problems, and external procedural issues.

Objective 1.2: The Enforcement Program will evaluate the impact of state and federal statutes and regulations affecting the program, identify the need for modifications, and proceed with implementation of new statutes and state regulations, and policy.

Facilitate and promote pending legislation, regulation, and policy changes.

On December 2, 2005, the Board approved proposed regulation amendments that are now in process to Title 16, Section 1435.2 of the California Code of Regulations. These amendments would conform to the Board regulation for the maximum fine permitted under statute (\$5,000) with Board cite and fine regulations, which are currently limited to \$2,500. The proposed regulations are in conformance with the department's Legal Affairs Office recommended restrictions to the circumstances when an increase in the fine should be imposed.

Review the Disciplinary Guidelines that went into effect in 2003 for their impact and any needed changes.

Also on December 2, 2005, the Board approved regulation amendments that are now in process for the Mental Health Examination condition to the Disciplinary Guidelines, revised last on May 24, 2003. The Disciplinary Guidelines are incorporated by reference into Title 16, Section 1444.5 of the California Code of Regulations.

Objective 1.3: The Enforcement Program will continue its contact with the National Council of State Boards of Nursing (NCSBN), and improve outreach to the public, health care providers, and other health related government agencies

Work with NCSBN on the Disciplinary Resources Advisory Panel and other projects as they arise.

The Enforcement Program Manager continues to participate in this advisory panel. These meetings are intended to expand resource material for member boards and also plan for an Investigator/Attorney conference in 2005.

Enforcement Program staff continue to maintain contact with NCSBN staff on issues regarding the enforcement database known as Nursys, and with federal officials regarding the enforcement database known as HIPDB.

Disseminate enforcement-related information through the Board's newsletter, website, and through other innovative means.

The Board website has been revised in 2005, and current Enforcement Program documents and information are available on the website. Recent improvements include changes to the Enforcement expert witness information, resulting in a significant increase in the number of expert witnesses applications.

Conduct outreach to health care providers, the public, and other government agencies through innovative ways, as permitted under the current budget situation.

In November of 2005, the BRN Enforcement Program, in conjunction with the DOI, coordinated the first part of a comprehensive training program for investigators, as well as some Deputies Attorney General. Investigators for the southern region were in attendance. The topics were specific to RN investigations, and included 10 modules.

9.3 Approve/Not Approve: Enforcement Program Proposed Goals and Objectives for Calendar Year 2006

E. Hochberg presented this report

Goal 1:

The Enforcement Program will promote consumer protection by effectively intervening to restrict the practice or revoke the licenses of registered nurses who have violated the Nursing Practice Act and related laws.

Objective 1.1: The Enforcement Program will develop cost effective, efficient, and innovative methods for managing discipline cases to achieve desired outcomes.

- Continue to evaluate and monitor activity of the Attorney General's (AG's) Office, including case statistics, and future projections in light of the current budget augmentation in fiscal year 2005-2006. Monitor AG and DOI compliance with timeframes and streamlining procedures.
- Explore innovative procedural changes to provide timely completion of cases within the BRN
- Evaluate case outcomes to identify strategies to enhance Enforcement Program effectiveness and efficiency.

Objective 1.2: The Enforcement Program will evaluate the impact of state and federal statutes and regulations affecting the program, identify the need for modifications, and proceed with implementation of new statutes and state regulations, and policy.

- Facilitate and promote pending legislation, regulation, and policy changes.
- Review the Disciplinary Guidelines that went into effect in 2003 for their impact and any needed changes.

Objective 1.3: The Enforcement Program will continue its contact with the National Council of State Boards of Nursing (NCSBN), and improve outreach to the public, health care providers, and other health related government agencies

- Work with NCSBN on the Disciplinary Resources Advisory Panel and other projects as they arise.
- Disseminate enforcement-related information through the Board's newsletter, website, and through other innovative means.
- Conduct outreach to health care providers, the public, and other government agencies through innovative ways, as permitted under the current budget situation.

MSC: Dietz/Morales-Board that the Board approve the Enforcement Programs Proposed Goals and Objectives for Calendar Year 2006. 6/0/0

9.4 Information Only: Diversion Program Update and Statistics

C. Stanford presented this report

The Diversion/Probation Program Acting Manager presented at the BRN/Enforcement Program's Division of Investigation training seminar held in Sacramento. Board staff and representatives from Division of Investigation, Drug Enforcement Agency, Department of Corrections and the Attorney General's Office were in attendance. The Diversion Program presentation helped educate the investigators about the program and provide a greater understanding of the program's processes and confidentiality requirements.

Contractor Update

The contractor is in the process of increasing its staff and has hired a new case manager, Sandra Meadows, R.N. She was originally employed by the previous contractor and will be an asset to this new contractor.

The final phases of the new Case Management System is occurring. The system, which allows participants and others to input their documents online via a secure server, is complete. A sample geographic area is being used on a trial basis.

Diversion Evaluation Committees (DEC)

There are currently eight vacancies as follows: two Public, two Physicians and four Registered Nurses. Interviews are scheduled and recruitment efforts are continuing in an effort to establish a larger pool of eligible candidates for appointment.

Statistics

A copy of the Monthly Statistical Summary Report for December 2005 through January 2006 was provided for review. As of January 31, 2006, there are 1124 successful completions

9.5 Information Only: Probation Program Update and Statistics

C. Stanford presented this report

Program Update

The Probation staff along with the Board chair, La Francine Tate, attended the BRN/Division of Investigation training seminar that provided a thorough and comprehensive review of registered nursing practices as it relates to investigators. It also provided information regarding how the BRN's Nursing Education Consultants, Enforcement, Probation, and Diversion staff and attorney General's Office interrelate.

Statistics

Below are the current statistics for the Probation Program through February 28, 2006.

MALE	112
FEMALE	322
CHEMICAL DEPENDENCY CASES	240
PRACTICE CASES	139
SOUTHERN CALIFORNIA	238
NORTHERN CALIFORNIA	196
PENDING AT THE AG	33
ADVANCED CERTIFICATES	44
TOTAL IN-STATE PROBATIONERS	434

9.6 Information Only: (a) Approve/Not Approve: Diversion Evaluation Committee Member Appointment (b) Information Only: Diversion Evaluation Committee Member Resignations

C. Stanford presented this report

In accordance with Section 2770.2 (B&P), the Board of Registered Nursing is responsible for appointing persons to serve on the Diversion Evaluation Committee(s) of its Diversion Program. Each Committee is composed of three registered nurses, a physician and a public member with expertise in chemical dependency and/or mental health.

Reappointments

The following DEC members are requesting a second term appointment. If the appointments are approved, their terms will expire on June 30, 2010.

Maureen Keating Registered Nurse Burbank DEC #8

Richard Pass	Registered Nurse	Palm Springs DEC #6
Carol Ann Romo	Registered Nurse	San Jose DEC #7

The following DEC members are requesting an extension of their appointment. All have served two terms and are interested in a one-year extension of their appointment. If approved, their terms will expire June 30, 2007.

Duane Bradford	Public	Palm Springs DEC #6
Elaine Bradley	Registered Nurse	San Diego DEC #10
Cathy Horowitz	Registered Nurse	Sacramento DEC #1
Janis Jones	Registered Nurse	Palm Springs DEC #6
Barbara Leva	Registered Nurse	Burbank DEC #8
Gordon Ogden	Registered Nurse	Central Valley DEC #5

MSC: Dietz/Phillips that the Board approve the DEC member appointments/extensions.
6/0/0

(b) Information Only: Diversion Evaluation Committee Member Resignation

Resignation:

Below is the name of the Diversion Evaluation Committee member who has resigned for personal reasons.

Sandra Meadows	Registered Nurse	Oakland DEC #13
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A letter and certificate of appreciation will be sent to acknowledge her service to the program.

The Diversion Program will continue recruiting efforts

9.7 Information Only: Diversion/probation Program 2005 Goals and Objectives – Summary of Accomplishments

C. Stanford presented this report

Goal 1:

The goal of the Diversion Program is to protect the public by early identification of impaired registered nurses and by providing these nurses access to appropriate intervention programs and treatment services.

Objective 1.1: The Diversion Program will continue to be strengthened, particularly in the areas of consumer protection by close monitoring of participants.

Protect consumers by reviewing regulations and policies to determine if changes are needed.

The BRN's existing policies were further strengthened and re-enforced by guidelines and protocols for relapses developed in joint coalition between the program contractor and the Diversion Program staff. These guidelines were reviewed and approved at Diversions Liaison Committee meeting.

Develop automated tools to assist in monitoring compliance of participants.

The contractor completed their new Case Management System (CMS) software. This system allows the contractor to have greater monitoring capabilities. It automates and captures compliance information from program reports and/or forms sent to Diversion. It also captures participant relapse information and notifies the board and participants of the relapse conditions.

The Diversion Program staff completed their training on the new system. This allows the staff immediate access to information regarding a participant's compliance status within the program.

Actively continue to recruit and appoint Nurse Support Group Facilitators and Diversion Evaluation Committee (DEC) members in needed locations.

A list of all applications for DEC members and NSG facilitators is maintained on the Diversion's database system. Throughout the year, the staff was able to use this list and new applications to interview and establish 5 new facilitators and hires 8 new DEC members.

An alert has been placed on the BRN web site to notify qualified professionals about the continual ongoing need for DEC members. Applications continue to come in on a periodic basis and are added to the programs database.

Board members and DEC members continue to be valuable resources and have helped the program obtain qualified applicants.

Observe DEC meetings to ensure consistent protocol in dealing with participants and to obtain feedback from DEC, participants and Contractor regarding any Program needs.

Diversion Program Staff attended over 15 DEC's throughout the year: to evaluate interactions between the new contractor, participants and DEC members; to identify needs and concerns of DEC members and participants; to support, and maintain consistent and effective communication between the different segments of the program. As a result, feedback was provided to the contractor and issues were addressed at the BRN's Diversion Liaison Committee meeting.

Objective 1.2: The program will continue its outreach to educate Registered Nurses (RNs), employers of RNs, the health care community and consumers so they will be able to identify impaired practice, intervene, report, and refer individuals to local treatment resources and the Diversion Program.

Respond to requests from consumers and Registered Nurses for information about the Diversion Program.

The Diversion Program staff continues to provide brochures, literature, and statistical information upon request. Staff mailed out approximately 417 packets containing information about the Diversion Program.

Expand use of innovative outreach methods such as use of Internet and other focused outreach efforts.

The BRN's website is continuously updated. The DDC agendas and minutes and the DLC agenda continue to be posted on the website. Staff continue to direct callers to the website and have been informed by callers that they have learned a great deal about the Diversion Program from the website and are glad to have this immediate access to information.

Give presentations about the Diversion Program in response to requests or when a need is identified.

Maximus gave several presentations throughout the year per the contract and in response to several requests. Additionally, several Nurse Support Group Facilitators and Diversion Evaluation Committee members gave presentations about the Diversion Program to various organizations within their geographical areas.

Objective 1.3: The Board's Diversion Program will interact with the Board's Enforcement Program and others to ensure effective methods of improving consumer protection and will identify innovative methods to improve the Program.

Continue to work closely with Enforcement Unit on cases involving substance abuse and mental health and continue to monitor processes between both programs to determine if revisions are necessary.

The Diversion Program staff and Enforcement staff continue to work closely together and meet when necessary to exchange information regarding nurses who have possible substance abuse or mental health issues. Processes continue to be modified as needed.

The Diversion Program Manager presented at the Enforcement Programs Division of Investigation training seminar. The Diversion Program presentation helped educate the investigators about the program and provide a greater understanding of the program's processes and confidentiality requirements.

Objective 1.4: The Board's Diversion Program staff will continue to educate, monitor, and evaluate the Contractor to ensure they are providing comprehensive

professional intervention, evaluation, referral, and monitoring services for the Diversion Program.

Closely evaluate the processes the contractor has in place to determine if they are meeting the needs of the program.

The Diversion Program staff sent several Corrective Action reports to the contractor, Maximus. These reports were issued when the BRN had concerns and requested further research regarding the contractor's handling of a case. Each one of the concerns was effectively addressed and has provided further insight to the contractor of the BRN's requirements and expectations.

Help contractor implement needed processes that are not yet in place to improve the monitoring and evaluation of the nurses in the program.

To facilitate the complex needs of the Diversion Program, Maximus developed a new Case Management System (CMS). This is an upgraded version of their database that is used to assist in the monitoring of all aspects of the Diversion Program. It was released in May 2005. Highlights of the system are:

- *Contractor allowed instant viewing of all DEC/Committee meeting agendas.*
- *Captures participant relapse information immediately*
- *Generates and prints participants History & Profiles*
- *Triggers notification of special events: contract compliance issues, missing program requirements, up-coming DEC/Committee meetings, etc.*
- *New Online Data Entry Web Site that captures monthly compliance information and provides a way for participant, worksite monitor, clinical assessor and facilitators to enter the participant's progress information directly into the system.*

The Diversion Program staff worked diligently with Maximus to develop and review new forms that will be used with the computer system.

Continue to meet with the Program Contractor in order to discuss ways to improve the quality of the Program and to hold them to the mandates of the contract.

Due to the complexity of the program and the massive changes that occurred as a result of the transition, the Diversion Program staff continues to meet with the contractor on a monthly basis. This is to solidify the implementation of the contract and to focus on improving the quality of services Maximus provides in their monitoring and operational systems.

Ensure that each individual who interacts with the Diversion Program has the training needed to be effective and supportive of the Program, including DEC members, Board and contractor personnel, and nurse support group facilitators.

The Diversion Program staff and the contractor case manager provide individual training of each new DEC member on a one on one basis at each DEC throughout the year.

The Diversion Program conducted a Diversion Liaison Committee meeting on April 28, 2005. BRN policies were reviewed and questions and concerns were addressed. Kim McKown, from Compass Vision (CVI), our testing lab, provided pertinent information regarding random body fluid testing. Minutes from the DLC meeting were distributed to all DEC members and Nurse Support Group facilitators.

GOAL 2:

The goal of the Probation Program is to protect the public by effectively monitoring the Registered Nurses whose licenses have been placed on probation due to violation of the Nursing Practice Act or other related laws.

Objective 1.1: Effectively monitor the compliance of RNs with their probationary terms and conditions to ensure rehabilitation and public safety.

Explore alternatives to address caseload increases and budget constraints, with highest priority on public protection.

The Probation Programs clerical position has been filled and cross training continues between the Diversion & Probation support staff to support each other and provide greater assistance to the programs as needed.

The Probation database system has been greatly enhanced to assist the probation monitors in tracking the compliance/noncompliance of each probationer.

Continue the collaboration among Probation, Diversion, Enforcement and Nursing Education Consultant staff to exchange ideas and coordinate functions.

The Probation Program processes are under review and information is being gathered to determine if additional streamlining is possible. The information obtained will be a part of a comprehensive work manual being developed for the Probation program.

Evaluate Probation Program recovery tools and establish consistency in methods between the two programs when feasible.

The knowledge and recovery experience of the staff and professionals in the Diversion Program is being provided to the Probation Monitors as the relationship and communication between the two programs continue to develop.

Establish relationship with Nurse Support Group facilitators to assist with monitoring probationers.

Nurse Group facilitators are encouraged to diligently support the BRN's probationers and to have greater communication with the Probation Monitor who oversees the probationers within their group.

Streamline the random drug testing system for probationers whose conditions include drug testing.

Staff has been researching the feasibility of establishing a new system of drug testing and is in the process of vigorously pursuing a computerized drug testing process similar to that, which is done by the Diversion Program.

9.8 Approve/Not Approve: Diversion/Probation Program Proposed Goals and Objectives for Calendar Year 2006

C. Stanford presented this report

GOAL 1

The Diversion Program will operate in a manner that protects the consumer and promotes the rehabilitation of registered nurses whose practice may be impaired due to chemical dependency and/or mental illness.

Objective 1.1: The Diversion Program will continue to be strengthened, particularly in the areas of consumer protection, cooperation with other states' rehabilitation programs, and response to effects of the changing health care environment.

- Protect consumers by reviewing statutes and regulations and policies to determine if changes are needed.
- Continue to increase interactions other states' recovery programs.
- Actively continue to recruit for Diversion Evaluation Committee (DEC) members and Nurse Support Group Facilitators in needed locations to continue low vacancy rate.
- Continue to observe DEC meetings to maintain consistency between the DEC's when dealing with participants and to obtain feedback from DEC, participants and Contractor regarding any Program needs.

Objective 1.2: The program will strengthen its outreach to educate registered nurses (RNs), employers of RNs, the health care community and consumers so they will be able to identify impaired practice, intervene, report, and refer individuals to local treatment resources and the Program.

- Give presentations about the Diversion Program in response to requests or when a need is identified.
- Continue to respond to requests from consumers for information about the Diversion Program or supply information when a need is identified.

- Expand use of innovative outreach methods such as use of Internet and other focused outreach efforts.

Objective 1.3: The Board's Diversion Program will interact with the Board's Enforcement Program and others to maintain effective methods of improving consumer protection and will identify innovative methods to improve the Program.

- Continue to work closely with Enforcement staff on cases involving substance abuse and mental health and continue to monitor processes between both programs to determine if revisions are necessary.
- Continue to work with other Boards and the current contractor, Maximus, to identify areas where the program can be improved.

Objective 1.4: The Board's Diversion Program and the Program Contractor will coordinate efforts to improve the monitoring of participants in the Program by those who provide services and information to the Program.

- Continue to meet with the Program Contractor in order to discuss ways to improve the quality of the Program.
- Continue to closely evaluate the processes the contractor has in place to determine if they are meeting the needs of the program.
- Continue to hold the contractor to the mandates of the contract.
- Ensure that each individual who interacts with the Diversion Program has the training needed to be effective and supportive of the Program, including DEC members, Board and contractor personnel, and nurse support group facilitators.

Objective 1.5 The Diversion Program will monitor and respond to changes in the health care system.

- Monitor statistical data to determine changes and trends in order to maintain an effective monitoring system for participants.
- Collaborate with the Nursing Practice Committee, Enforcement Program, and the Diversion Program's external network regarding changes that may require new or revised methods of protecting public safety.

GOAL 2:

The Probation Program will promote consumer protection by effectively monitoring the rehabilitation of registered nurses who have violated the Nursing Practice Act and related laws.

Objective 1.1: Identify those areas in the Probation Program where changes can be made to increase the effectiveness of the Program and implement the changes.

- Ensure collaboration of Probation and Diversion staff on a regular basis to exchange ideas. Implement appropriate changes where necessary.
- Review all forms utilized by the Probation Program to determine if changes need to be made.
- Establish a greater relationship between the Nurse Support Group facilitators and the BRN's Probation Monitors.
- Determine the feasibility of streamlining the random drug testing system for probationers by obtaining an 800 number for probationers to call for drug testing
- Continue streamlining processes to assist probation monitors in effective managing of their increasing caseloads.

MSC: Phillips/Dietz that the Board approve the Diversion/Probation Program proposed Goals and Objectives for Calendar Year 2006. 6/0/0

10.0 REPORT OF THE EDUCATION/LICENSING COMMITTEE

C. Morales-Board, Chairperson

10.1 Approve/Not Approve: Education/Licensing Committee Recommendations:

M. Minato presented this report

Approve Continue Approval of Nursing Program:

- California State University, Los Angeles, Baccalaureate Degree and Entry Level Master's Programs

Approve Major Curriculum Revisions:

- California State University, Bakersfield, Baccalaureate Degree Nursing Program
- California State University, Fresno, Baccalaureate Degree Nursing Program
- College of Marin, Associate Degree Nursing Program

MSC: Corse/Dietz that the Board approve the recommendations from the Education/Licensing Committee. 6/0/0

10.2 Ratify Minor Curriculum Revisions

M. Minato presented this report

According to Board policy, Nursing Education Consultants may approve minor curriculum changes that do not significantly alter philosophy, objectives, or

content. Approvals must be reported to the Education/Licensing Committee and the Board.

The following programs have submitted minor curriculum revisions that have been approved by the NECs:

- Sonoma State University, Entry Level Master's Program
- Biola University, Baccalaureate Degree Nursing Program
- Fresno City College, Associate Degree Nursing Program
- San Joaquin Delta College, Associate Degree Nursing Program

The following program submitted a progress report that has been accepted by the NECs:

- Western University of Health Sciences, Entry Level Master's Program

MSC: Furillo/Dietz that the Board approve the minor curriculum revisions. 6/0/0

10.3 Update on Education Advisory Committee

C. Mackay presented this report

As reported at the February 17, 2006, Board meeting, highlights from the 2004-2005 BRN Annual School Report were presented, and the report was posted on the website on March 7, 2006. The Board received numerous inquiries from the nursing community, state legislators and other stakeholders in nursing education, and the Board has been very responsive and continues to work on responding to those inquiries.

The committee met on April 4, 2006, and the activities connected with the report and have been accomplished to date, and future plans are reflected below. The grant for this project ends June 30, 2006. The final meeting of the Education Advisory Committee is scheduled for June 1, 2006. A final report will be submitted at the June 9, 2006, Board meeting.

MGT of America designed and conducted the research project and the database it generated belongs to the BRN. The database has been transferred to the University of California, San Francisco with whom the Board has an interagency agreement to do the BRN Annual Report next year, but also conduct future surveys.

Another activity of the database is to develop access guidelines for interested researchers who want to conduct further research on the database and to share it with the Board. S. Brank, of the BRN who has been investigating processes of other state agencies, presented a draft form and process to the committee that will be received by the BRN to review and approve, prior to allowing access. The form will be presented to the Board in June.

The committee also began in-depth review of the survey questionnaire that was used last year.

11.0 Report of the Nursing Practice Committee

Grace Corse, Chairperson

11.1 Information Only: Pharmacy Law Updates effective January 1, 2006

a) Prescription medication container labels

b) Security prescription forms

Janette Wackerly presented

The Pharmacy Board's publication "The Script" has provided information on changes in Pharmacy Law 2006 that is of interest to registered nurses and advanced practice nurses.

Of interest: Prescription Container-Requirements for labeling amended BPC 4076 effective January 1, 2004. Although the requirement was enacted in 2004, pharmacy board is aware that the change had significant impact on operation for some pharmacies. The pharmacy board focus will be to seek compliance through education during the first 6 months of 2006.

The label on prescription containers dispensed from outpatient pharmacies requires a physical description of the medication, including its color, shape and any identification code that appears on the tablets or capsules pursuant to BPC section (a)(11)(A). For example a prescription label for Ibuprofen Tab 400 mg might include a notation, "This medication is a white, oval shaped, film-coated tablet imprinted with IBU 400". A label for Pravachol might include, "Square yellow tablet, Side 1: P, Side @: Pravachol #20. Other requirements are listed in the handout on page 19. But importantly when a pharmacist dispenses a prescription drug for use in a facility licensed pursuant to section 1250 of the Health and Safety Code (e.g. acute care hospitals, skilled nursing facility, and correctional treatment centers) and the prescription drug is administered to a patient by a licensed certified nurse midwife, nurse practitioner, physician assistant or pharmacist who is acting within his or her scope of practice.

Of interest: Prescription Forms for Controlled Substance Prescriptions: Requirements Health and Safety Code 11161.5 is amended transferring responsibility to the Department of Justice (DOJ) for approval of security prescription printers. The DOJ now is solely responsible for:

- Determining whether to approve or deny the security printer application or to revoke a security printer's approval; and
- Maintaining a list of approved security printers and providing information to the Board of Pharmacy.

11.2 Information Only: Promulgating Nurse Practitioner Regulations: CCR Section 1485 Scope of Practice; and CCR 1481 Categories of Nurse Practitioners

Janette Wackerly presented this report

The Board received a request from the California Association of Nurse Practitioners to promulgate additional regulatory language to Article 8 Standards for Nurse Practitioners Sections: §1480 Definitions, §1481 Categories of Nurse Practitioners, and §1485 Scope of Practice. A copy of the suggested language was provided for review.

Comments: V. Bermudez, California Nurses Association

Meeting Adjourned at 11:00 a.m.

Ruth Ann Terry, MPH, RN
Executive Officer

L. Tate
President